

Facsimile



Office of the General Counsel
400 Collins Rd. NE M/S 124-323
Cedar Rapids, IA 52498

To:	Mail Stop: Amendment	From:	Sheila K. Mathews
Location:	US Patent Office	Location:	124-323
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Pages:	41 (including Lead)	Date:	November 5, 2007

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Applicant: Zuber et al.

Serial No. 10/643,451

Filed: August 19, 2003

Docket No.: 02CR360/KE

For: Fail-Safe Transmission Of Multiple Independent Levels Of Security Using Standard Data Busses Apparatus And Method

Item: Amendment comprising of 13 pages, Amendment transmittal comprising of 2 pages (in duplicate), Petition to Accept Unintentionally Delays Priority Claim comprising of 2 pages (in duplicate), Consent of Assignee to Add Inventor comprising of 2 pages w/Assignments attached comprising of 4 pages, Request for Correction Of Inventorship comprising of 3 pages (in duplicate), Statement of No Deceptive Intention (Jakoubek) 1 page, Declaration comprising of 6 pages


Sheila K. Mathews

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Atty. Dkt. No. 02CR360/KE (047141-0311)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**RECEIVED
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Applicant: Zuber et al.

Title: FAIL-SAFE TRANSMISSION OF
MULTIPLE INDEPENDENT
LEVELS OF SECURITY USING
STANDARD DATA BUSES
APPARATUS AND METHOD

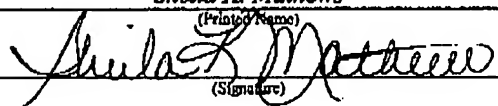
Appl. No.: 10/643,451

Filing Date: 8/19/2003

Examiner: Gee, Jason Kai Yin

Art Unit: 2134

Conf. No.: 4397

CERTIFICATE OF FACSIMILE TRANSMISSION	
I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.	
Sheila K. Mathews	
(Printed Name)	
	
(Signature)	
11/5/07	
(Date of Deposit)	

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	10	-	20	=	0	x	\$50.00	=	\$0.00
Independent Claims:	2	-	3	=	0	x	\$210.00	=	\$0.00
First presentation of any Multiple Dependent Claims:		+					\$370.00	=	\$0.00
CLAIMS FEE TOTAL									\$0.00

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01-10-1001 450.00.00

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-1-

(25)

Atty. Dkt. No. 02CR360/KE (047141-0311)

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the
total number of months checked below:

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[] Extension for response filed within the first month:	\$120.00	\$0.00
[X] Extension for response filed within the second month:	\$460.00	\$460.00
[] Extension for response filed within the third month:	\$1,050.00	\$0.00
[] Extension for response filed within the fourth month:	\$1,640.00	\$0.00
[] Extension for response filed within the fifth month:	\$2,230.00	\$0.00
EXTENSION FEE TOTAL:		\$0.00
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$0.00
[] Small Entity Fees Apply (subtract ½ of above):		\$0.00
Extension Fees Previously Paid:		\$0.00
TOTAL FEE:		\$460.00

If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 18-1722.

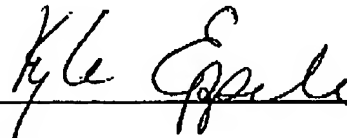
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

11/5/2007

By



ROCKWELL COLLINS, INC.
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Cedar Rapids, IA 52498
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Kyle Eppele
Attorney for Applicants
Registration No. 34,155

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MULTIPLE INDEPENDENT
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STANDARD DATA BUSES
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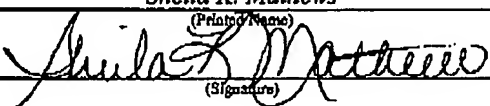
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Independent Claims:	2	-	3	=	0	x	\$210.00	=	\$0.00
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CLAIMS FEE TOTAL									= \$0.00

Atty. Dkt. No. 02CR360/KE (047141-0311)

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Respectfully submitted,

Date 11/5/2007

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